

2004 SCHOOL HEALTH PROFILE LEAD HEALTH EDUCATION TEACHER QUESTIONNAIRE

This questionnaire will be used to assess school health education across your state or school district. Your cooperation is essential for making the results of this survey comprehensive, accurate, and timely. Your answers will be kept confidential.

INSTRUCTIONS

1. This questionnaire should be completed by the **lead health education teacher** (or the person acting in that capacity) and concerns only activities that occur in the school listed below. Please consult with other people if you are not sure of an answer.
2. Please use a #2 pencil to fill in the answer circles completely. Do not fold, bend, or staple this questionnaire or mark outside the answer circles.
3. Follow the instructions for each question.
4. Write any additional comments you wish to make at the end of this questionnaire.
5. Return the questionnaire in the envelope provided.

Person completing this questionnaire

Name: _____
Title: _____
School name: _____
District: _____
Telephone number: _____

To be completed by the SEA or LEA conducting the survey

School name: _____

Survey ID			
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

REQUIRED HEALTH EDUCATION COURSES

(Definition: A required health education course is taught as a separate semester- or quarter-long unit of instruction for which the student receives credit. It is not health education units or lessons integrated into other subjects.)

1. Is a health education course required for students in any of grades 6 through 12 in this school? (Mark one response.)

- a. Yes
b. No — Skip to Question 12

2. Are teachers in this school required to use each of the following materials in a required health education course for students in any of grades 6 through 12? (Mark yes or no for each type of material.)

	Yes	No
Material		
a. The National Health Education Standards.....	0	0
b. Your state's curriculum, set of guidelines, or framework.....	0	0
c. Your district's curriculum, set of guidelines, or framework.....	0	0
d. Your school's curriculum, set of guidelines, or framework.....	0	0
e. Any materials from health organizations, such as the American Red Cross or the American Cancer Society.....	0	0
f. A commercially-developed student textbook.....	0	0
g. A commercially-developed teacher's guide.....	0	0

3. During this school year, have teachers in this school tried to increase student knowledge on each of the following topics in a required health education course in any of grades 6 through 12? (Mark yes or no for each topic.)

		Yes	No
Topic			
a.	Accident or injury prevention.....	0	0
b.	Alcohol or other drug use prevention.....	0	0
c.	Consumer health.....	0	0
d.	CPR (cardiopulmonary resuscitation).....	0	0
e.	Death and dying.....	0	0
f.	Dental and oral health.....	0	0
g.	Emotional and mental health.....	0	0
h.	Environmental health.....	0	0
i.	First aid.....	0	0
j.	Growth and development.....	0	0
k.	HIV (human immunodeficiency virus) prevention.....	0	0
l.	Human sexuality.....	0	0
m.	Immunization and vaccinations.....	0	0
n.	Nutrition and dietary behavior.....	0	0
o.	Personal hygiene.....	0	0
p.	Physical activity and fitness.....	0	0
q.	Pregnancy prevention.....	0	0
r.	STD (sexually transmitted disease) prevention.....	0	0
s.	Suicide prevention.....	0	0
t.	Sun safety or skin cancer prevention.....	0	0
u.	Tobacco use prevention.....	0	0
v.	Violence prevention (such as bullying, fighting, or homicide).....	0	0

4. During this school year, have teachers in this school tried to improve each of the following student skills in a required health education course in any of grades 6 through 12? (Mark yes or no for each skill.)

		Yes	No
Skill			
a.	Accessing valid health information, products, and services.....	0.....	0
b.	Advocating for personal, family, and community health.....	0.....	0
c.	Analysis of media messages.....	0.....	0
d.	Communication.....	0.....	0
e.	Decision making.....	0.....	0
f.	Goal setting.....	0.....	0
g.	Conflict resolution.....	0.....	0
h.	Resisting peer pressure for unhealthy behaviors (i.e., refusal skills).....	0.....	0
i.	Stress management.....	0.....	0

5. During this school year, have teachers in this school used each of the following teaching methods in a required health education course in any of grades 6 through 12? (Mark yes or no for each teaching method.)

		Yes	No
Teaching method			
a.	Group discussions.....	0.....	0
b.	Cooperative group activities.....	0.....	0
c.	Role play, simulations, or practice.....	0.....	0
d.	Language, performing, or visual arts.....	0.....	0
e.	Pledges or contracts for behavior change.....	0.....	0
f.	Peer educators.....	0.....	0
g.	The Internet.....	0.....	0
h.	Computer-assisted instruction.....	0.....	0

6. During this school year, have teachers in this school used each of the following teaching methods to highlight diversity or the values of various cultures in a required health education course in any of grades 6 through 12? (Mark yes or no for each teaching method.)

Yes No

Teaching method

- a. Use textbooks or curricular materials reflective of various cultures.....0.....0
- b. Use textbooks or curricular materials designed for students with limited English proficiency.....0.....0
- c. Ask students to share their own cultural experiences related to health topics.....0.....0
- d. Teach about cultural differences and similarities.....0.....0
- e. Modify teaching methods to match students' learning styles, health beliefs, or cultural values.....0.....0

7. During this school year, have teachers in this school asked students to participate in each of the following activities as part of a required health education course in any of grades 6 through 12? (Mark yes or no for each activity.)

Yes No

Activity

- a. Perform volunteer work at a hospital, a local health department, or any other community organization that addresses health issues.....0.....0
- b. Participate in or attend a school or community health fair.....0.....0
- c. Gather information about health services that are available in the community.....0.....0
- d. Visit a store to compare prices of health products.....0.....0
- e. Identify potential injury sites at school, home, or in the community.....0.....0
- f. Identify and analyze advertising in the community designed to influence health behaviors or health risk behaviors.....0.....0
- g. Advocate for a health-related issue.....0.....0
- h. Complete homework assignments with family members0.....0

8. **During this school year, did teachers in this school teach each of the following tobacco use prevention topics in a required health education course for students in any of grades 6 through 12?** (Mark yes or no for each topic.)

Yes No

Topic

- | | | | |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---|
| a. | Short- and long-term health consequences of cigarette smoking (such as stained teeth, bad breath, heart disease, and cancer)..... | 0..... | 0 |
| b. | Benefits of not smoking cigarettes (including long- and short-term health benefits, social benefits, environmental benefits, and financial benefits)..... | 0..... | 0 |
| c. | Risks of cigar or pipe smoking..... | 0..... | 0 |
| d. | Short- and long-term health consequences of using smokeless tobacco..... | 0..... | 0 |
| e. | Benefits of not using smokeless tobacco..... | 0..... | 0 |
| f. | Addictive effects of nicotine in tobacco products..... | 0..... | 0 |
| g. | How many young people use tobacco..... | 0..... | 0 |
| h. | The number of illnesses and deaths related to tobacco use..... | 0..... | 0 |
| i. | Influence of families on tobacco use..... | 0..... | 0 |
| j. | Influence of the media on tobacco use..... | 0..... | 0 |
| k. | Social or cultural influences on tobacco use..... | 0..... | 0 |
| l. | How to find valid information or services related to tobacco use cessation..... | 0..... | 0 |
| m. | Making a personal commitment not to use tobacco..... | 0..... | 0 |
| n. | How students can influence or support others to prevent tobacco use | 0..... | 0 |
| o. | How students can influence or support others in efforts to quit using tobacco..... | 0..... | 0 |
| p. | How to say no to tobacco use..... | 0..... | 0 |
| q. | The health effects of environmental tobacco smoke (ETS) or second-hand smoke..... | 0..... | 0 |

9. During this school year, did teachers in this school teach each of the following HIV prevention topics in a required health education course for students in any of grades 6 through 12? (Mark yes or no for each topic.)

	Yes	No
Topic		
a. Abstinence as the most effective method to avoid HIV infection.....	0	0
b. How HIV is transmitted.....	0	0
c. How HIV affects the human body.....	0	0
d. How to correctly use a condom.....	0	0
e. Condom efficacy, that is, how well condoms work and do not work.....	0	0
f. Influence of alcohol and other drugs on HIV-related risk behaviors.....	0	0
g. Social or cultural influences on HIV-related risk behaviors.....	0	0
h. The number of young people who get HIV.....	0	0
i. How to find valid information or services related to HIV or HIV testing.....	0	0
j. Compassion for persons living with HIV or AIDS.....	0	0

10. During this school year, did teachers in this school teach each of the following nutrition and dietary topics in a required health education course for students in any of grades 6 through 12? (Mark yes or no for each topic.)

	Yes	No
Topic		
a. The benefits of healthy eating.....	0	0
b. Identifying Food Guide Pyramid food groups and serving recommendations	0	0
c. Using food labels.....	0	0
d. Aiming for a healthy weight (balancing food intake and physical activity).....	0	0
e. Choosing a variety of grains daily, especially whole grains.....	0	0
f. Choosing a variety of fruits and vegetables daily.....	0	0
g. Choosing a diet low in saturated fat and cholesterol and moderate in total fat.....	0	0
h. Moderating intake of sugars.....	0	0
i. Choosing and preparing foods with less salt.....	0	0
j. Choosing more calcium-rich foods.....	0	0
k. Keeping food safe to eat.....	0	0
l. Preparing healthy meals and snacks.....	0	0
m. Risks of unhealthy weight control practices.....	0	0
n. Accepting body size differences.....	0	0
o. Eating disorders.....	0	0

11. **During this school year, did teachers in this school teach each of the following physical activity topics in a required health education course for students in any of grades 6 through 12?** (Mark yes or no for each topic.)

Topic	Yes	No
a. The physical, psychological, or social benefits of physical activity...	0.....0	
b. Health-related fitness (i.e., cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition).....	0.....0	
c. Phases of a workout (i.e., warm-up, workout, and cool down).....	0.....0	
d. How much physical activity is enough (i.e., determining frequency, intensity, time, and type of physical activity).....	0.....0	
e. Developing an individualized physical activity plan.....	0.....0	
f. Monitoring progress toward reaching goals in an individualized physical activity plan.....	0.....0	
g. Overcoming barriers to physical activity.....	0.....0	
h. Decreasing sedentary activities such as television watching.....	0.....0	
i. Opportunities for physical activity in the community.....	0.....0	
j. Preventing injury during physical activity.....	0.....0	
k. Weather-related safety (e.g., avoiding heat stroke, hypothermia, and sunburn while physically active).....	0.....0	
l. Dangers of using performance-enhancing drugs, such as steroids.....	0.....0	

TOBACCO USE PREVENTION AND HIV PREVENTION

12. **During this school year, in which of the following grades was information on tobacco use prevention provided?** (Mark yes, no, or not applicable for each grade.)

Grade	Yes	No	Not Applicable (e.g. grade not taught in this school)
a. 6.....	0.....0	0.....0	0
b. 7.....	0.....0	0.....0	0
c. 8.....	0.....0	0.....0	0
d. 9.....	0.....0	0.....0	0
e. 10.....	0.....0	0.....0	0
f. 11.....	0.....0	0.....0	0
g. 12.....	0.....0	0.....0	0

13. Are required tobacco use prevention units or lessons taught in each of the following courses in this school? (Mark yes or no for each course.)

	Yes	No
Course		
a. Science.....	0	0
b. Home economics or family and consumer education.....	0	0
c. Physical education.....	0	0
d. Family life education or life skills.....	0	0
e. Special education.....	0	0
f. Social studies.....	0	0

14. Are required HIV prevention units or lessons taught in each of the following courses in this school? (Mark yes or no for each course.)

	Yes	No
Course		
a. Science.....	0	0
b. Home economics or family and consumer education.....	0	0
c. Physical education.....	0	0
d. Family life education or life skills.....	0	0
e. Special education.....	0	0
f. Social studies.....	0	0

COLLABORATION

15. During this school year, have any health education staff worked with each of the following groups on health education activities? (Mark yes or no for each group.)

	Yes	No
Group		
a. Physical education staff.....	0	0
b. School health services staff (e.g., nurses).....	0	0
c. School mental health or social services staff (e.g., psychologists, counselors, and social workers).....	0	0
d. Food service staff.....	0	0
e. Community members.....	0	0
f. Teachers in other subject areas.....	0	0

16. During this school year, has this school done each of the following activities? (Mark yes or no for each activity.)

	Yes	No
Activity		
a. Provided families with information on the health education program.....	0	0
b. Met with a parents' organization such as the PTA or PTO to discuss the health education program.....	0	0
c. Invited family members to attend a health education class.....	0	0

STAFF DEVELOPMENT

17. During the past two years, did you receive staff development (such as workshops, conferences, continuing education, or any other kind of in-service) on each of the following health education topics? (Mark yes or no for each topic.)

	Yes	No
Topic		
a. Accident or injury prevention.....	0	0
b. Alcohol or other drug use prevention.....	0	0
c. Consumer health.....	0	0
d. CPR (cardiopulmonary resuscitation).....	0	0
e. Death and dying.....	0	0
f. Dental and oral health.....	0	0
g. Emotional and mental health.....	0	0
h. Environmental health.....	0	0
i. First aid.....	0	0
j. Growth and development.....	0	0
k. HIV (human immunodeficiency virus) prevention.....	0	0
l. Human sexuality.....	0	0
m. Immunization and vaccinations.....	0	0
n. Nutrition and dietary behavior.....	0	0
o. Personal hygiene.....	0	0
p. Physical activity and fitness.....	0	0
q. Pregnancy prevention.....	0	0
r. STD (sexually transmitted disease) prevention.....	0	0
s. Suicide prevention.....	0	0
t. Sun safety or skin cancer prevention.....	0	0
u. Tobacco use prevention.....	0	0
v. Violence prevention (such as bullying, fighting, or homicide).....	0	0

18. Would you like to receive staff development on each of these health education topics? (Mark yes or no for each topic.)

		Yes	No
Topic			
a.	Accident or injury prevention.....	0.....	0
b.	Alcohol or other drug use prevention...0.....	0.....	0
c.	Consumer health.....0.....	0.....	0
d.	CPR (cardiopulmonary resuscitation)...0.....	0.....	0
e.	Death and dying.....0.....	0.....	0
f.	Dental and oral health.....0.....	0.....	0
g.	Emotional and mental health.....0.....	0.....	0
h.	Environmental health.....0.....	0.....	0
i.	First aid.....0.....	0.....	0
j.	Growth and development.....0.....	0.....	0
k.	HIV (human immunodeficiency virus) prevention.....0.....	0.....	0
l.	Human sexuality.....0.....	0.....	0
m.	Immunization and vaccinations.....0.....	0.....	0
n.	Nutrition and dietary behavior.....0.....	0.....	0
o.	Personal hygiene.....0.....	0.....	0
p.	Physical activity and fitness.....0.....	0.....	0
q.	Pregnancy prevention.....0.....	0.....	0
r.	STD (sexually transmitted disease) prevention.....0.....	0.....	0
s.	Suicide prevention.....0.....	0.....	0
t.	Sun safety or skin cancer prevention.....0.....	0.....	0
u.	Tobacco use prevention.....0.....	0.....	0
v.	Violence prevention (such as bullying, fighting, or homicide).....0.....	0.....	0

19. During the past two years, did you receive staff development (such as workshops, conferences, continuing education, or any other kind of in-service) on each of the following teaching methods? (Mark yes or no for each teaching method.)

		Yes	No
Teaching method			
a.	Teaching students with physical or cognitive disabilities.....	0.....	0
b.	Teaching students of various cultural backgrounds.....	0.....	0
c.	Teaching students with limited English proficiency.....	0.....	0
d.	Using interactive teaching methods such as role plays or cooperative group activities	0.....	0
e.	Encouraging family or community involvement	0.....	0
f.	Teaching skills for behavior change (e.g., communication, decision making, etc.).....	0.....	0

20. Would you like to receive staff development on each of these teaching methods? (Mark yes or no for each teaching method)

		Yes	No
Teaching method			
a.	Teaching students with physical or cognitive disabilities.....	0.....	0
b.	Teaching students of various cultural backgrounds.....	0.....	0
c.	Teaching students with limited English proficiency.....	0.....	0
d.	Using interactive teaching methods such as role plays or cooperative group activities	0.....	0
e.	Encouraging family or community involvement	0.....	0
f.	Teaching skills for behavior change (e.g., communication, decision making, etc.).....	0.....	0

PROFESSIONAL PREPARATION

21. What was the major emphasis of your professional preparation? (Mark one response.)
- a. Health and physical education combined
 - b. Health education
 - c. Physical education
 - d. Other education degree
 - e. Kinesiology
 - f. Exercise science or exercise physiology
 - g. Home economics or family and consumer science
 - h. Science
 - i. Nursing
 - j. Counseling
 - k. Public health
 - l. Other
22. Do you hold a current teaching license, certificate, or endorsement in health education recognized by your state department of education? (Mark one response.)
- a. Yes
 - b. No
23. Including this school year, how many years have you been teaching health education? (Mark one response.)
- a. 1 year
 - b. 2 to 5 years
 - c. 6 to 9 years
 - d. 10 to 14 years
 - e. 15 years or more

Thank you for your responses. Please return this questionnaire.

COMMENTS
